

<b>DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN  PATENT APPLICATION</b>  <input checked="" type="checkbox"/> Declaration <input type="checkbox"/> Declaration Submitted with      Submitted after Initial Initial Filing      Filing (surcharge 37 CFR 1.16(e) required)	Attorney Docket No.	MDS-034
	First Named Inventor	Schomacker
	<b>COMPLETE IF KNOWN</b>	
	Application Serial Number	Not Yet Assigned
	Filing Date	Herewith
	Group Art Unit	Not Yet Assigned
	Examiner Name	Not Yet Assigned

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Optimal Windows for Obtaining Optical Data for Characterization of Tissue Samples

(Title of the Invention)

the specification of which

☒ is attached hereto  
OR

☐ was filed on (MM/DD/YYYY) as United States Application Serial Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose to the Patent Office all information known by me to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information known by me which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, or inventor's certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, or inventor's certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Serial Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application serial numbers are listed on a supplemental priority data sheet attached hereto.
60/394,696	07/09/2002	

# Declaration and Power of Attorney for Utility or Design Patent Application

Serial No. Not Yet Assigned

Atty. Docket No. MDS-034

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## DECLARATION – Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c), of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Serial Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioners to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

Place Customer  
Number Bar Code  
Label Here

Name	Registration Number	Name	Registration Number
Michael J. Bastian	47,411	John D. Lanza	40,060
Steven M. Bauer	31,481	Kurt W. Lockwood	40,704
Mark L. Beloborodov	50,773	Bradley M. Marazas	P-51,997
John V. Bianco	36,748	Leigh J. Martinson	50,749
Robert S. Blasi	50,389	Thomas C. Meyers	36,989
Michael H. Brodowski	41,640	Joseph B. Milstein	42,897
Jennifer A. Camacho	43,526	Ronda P. Moore	44,244
Joseph A. Capraro, Jr.	36,471	Jeremy Occek	50,794
Fangli Chen	P-51,551	Edmund R. Pitcher	27,829
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John J. Cotter	38,116	David L. Schuler	51,190
Robert V. Donahoe	46,667	Christopher W. Stamos	35,370
Brian A. Fairchild	48,645	Diana M. Steel	43,153
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Steven J. Frank	33,497	Robert J. Tosti	35,393
Kia L. Freeman	47,577	Thomas A. Turano	35,722
Christopher J. Frerking	42,557	Natasha C. Us	44,381
Brian M. Gaff	44,691	Christine C. Vito	39,061
Duncan A. Greenhalgh	38,678	Patrick R.H. Waller	41,418
Ira V. Heffan	41,059	Daniel A. Wilson	45,508
Danielle L. Herritt	43,670	Gerald E. Worth	45,238
Douglas J. Kline	35,574	Yin P. Zhang	44,372
<input type="checkbox"/> Additional registered practitioners named on supplemental Registered Practitioner Information sheet attached hereto.			

Direct all correspondence to:

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Fax No.: (617) 248-7100

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

<b>Name of Sole or First Inventor:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])						Family Name or Surname			
Kevin T.						Schomacker			
Inventor's Signature	<i>Kevin T. Schomacker</i>						Date	11/13/02	
Residence	City	Maynard	State	MA	Country	USA	Citizenship	USA	
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<input checked="" type="checkbox"/> Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) attached hereto.									
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])						Family Name or Surname			
Alex						Zelenchuk			
Inventor's Signature	<i>Alex R. Zelenchuk</i>						Date	11/13/02	
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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])						Family Name or Surname			
Ross						Flewelling			
Inventor's Signature	<i>Ross Flewelling</i>						Date	11/13/02	
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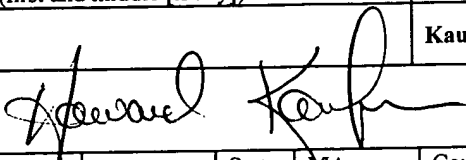
Supplemental Sheet of Declaration and Power of Attorney for Utility or Design Patent Application

Serial No. Not Yet Assigned

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<b>DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION</b>	<b>ADDITIONAL INVENTOR(S)</b> <b>Supplemental Sheet</b> Page 1 of 1
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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
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Inventor's Signature				Date	11/13/02			
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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])				Family Name or Surname				
Inventor's Signature	1			Date				
Residence	City		State		Country	USA	Citizenship	
Mailing Address								
Mailing Address (In. 2)	City		State		ZIP		Country	

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